DTE 23 Rev. 4/05

Application for Real Property Tax Exemption and Remission

County Name

ALAN HAROLD STARK COUNTY AUDITOR 110 CENTRAL PLAZA S. # 220 CANTON, OHIO 44702 TELEPHONE: (330) 451-7184

Date received by DTE
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Office Use Only				
County application number				
DTE application number				

General Instructions

="	Submit three copies of this application to the auditor's office in the county where the property is located. (Make a
	copy for your records.) Applications should not be filed until the year following acquisition of the property. The
	final deadline for filing with the county auditor is Dec. 31 of the year for which exemption is sought. If you need
	assistance in completing this form, contact your county auditor.

Both the County Auditor's Finding (page 3) and the Treasurer's Certificate (page 4) of this application must be completed. Ask your county auditor for the procedure to follow to obtain the Treasurer's Certificate. When presented with this application, the county treasurer should promptly complete the certificate and return the application to you so it may be filed with the county auditor. The county treasurer should make certain the treasurer's certificate is complete and accurately reflects the payment status of taxes, special assessments penalties, and interest, by tax year. Obtain a copy of the property record card from the county auditor and enclose it with this application. It is the applicant's responsibility to make sure the information supplied by the county auditor and county treasurer is complete and accurate.

Answer all questions on the form. If you need more room for any question, use additional sheets of paper to explain details. Please indicate which question each additional sheet is answering. This application must be signed by the property owner or the property owner's representative.

Please Type or Print Clearly

Application is hereby made to have the following property removed from the tax list and duplicate and placed on the tax exempt list for the current tax year, and to have the taxes and penalties thereon remitted for these preceding tax years:

Appli	cant Name:								
		Name							
Notices concerning this application should be sent to:									
		Name (if different from applicant)							
		Address							
		City			State	ZIP	Telephone r	number	
1.	Parcel numbe (if more than for continue on an sheet). All parc must be in the school district	ur, attached eels same	a) _ b) _ c) _ d) _						
2.	School district	where lo	cated						
3.	Total size of p	arcel(s)		Less than ONE ac	re C	One acre or	MORE	Number of acres	
4.	Street address location of pro								

5.	a) Title to this property is in the name of							
•	b) Address of owner							
6.	If title holder is different from the applicant, please explain							
7.	. Title holder is: A nonprofit corporation An unincorporated association/organization							
	(check one)							
8.	Exact date title was acquired 9. Title was acquired from Please attach copy of the deed.							
10.	Does the applicant have a lease or land contract for this property? If yes, please attach a copy.	☐ Yes ☐ No						
11.	Amount paid by title holder for the property							
12.	Exact date the exempt use began							
13.	Under what section(s) of the Ohio Revised Code (R.C.) is exemption sought? R.C R.C R.C.							
14.	How is this property being used? Do not give conclusions such as charitable purpose purpose. Be specific about what is being done on the property and who uses it. If the used, but there is an intent to use it later for an exempt purpose, describe the intende intended use.	property is not currently being						
15.	During the years in question, was any part of this property (check one):							
	a) Leased or rented to anyone else?	☐ Yes ☐ No						
	If yes, please attach copy of lease agreement.	□ _{Yes} □ _{No}						
	b) Used for the operation of any business?							
	c) Used for agricultural purposes?	☐ Yes ☐ No						
	d) Used to produce any income other than donations? Note: If the answer to any part of question 15 is "yes," angless all details on a second							
	Note: If the answer to any part of question 15 is "yes," enclose all details on a s money is received, submit profit and loss statements, income and expense data financial statements.							
16.	Is anyone living or residing on any part of this property? If yes, answer the following: a) The person's name and position	☐ Yes ☐ No						
	b) The resident's duties (if any) in connection with this property							
	c) The rent paid or other financial arrangements							
17.	Is anyone using this property other than the applicant? If yes, please enclose a complete, detailed explanation.	☐ Yes ☐ No						
18.	Does the applicant own property in this county which is already exempt from taxation	?						
19.	Property used for charitable purposes . Please provide articles of incorporation, constitution or by-laws, IRS determination letter and any other similar relevant information.							
20.	Property used for senior citizens' residences. If the purpose of the property is to provide a place of residence for senior citizens , so by R.C. section 5701.13.	submit all information required						

The Ohio Department of Taxation may set a hearing on this application. If there is a hearing, the applicant must present a witness who can accurately describe the use of the property in question. A notice of at least 10 days will be given to the applicant concerning the time and place of any hearing.

I declare under penalty of perjury that I have examined this application and, to the best of my knowledge and belief, it is

Applicant or representative: Signature Print name and title	
Print name and title	
Address	
Address	
City State ZIP	
Telephone number Date	
County Auditor's Finding	
Land Building Total	
Taxable Value in Year of Application (Tax Year)	
Taxable Value in Prior Year (Tax Year)	
This application covers property that is (check all that apply):	
☐ Currently exempt* ☐ New construction on previously ☐ Currently on CAL	JV
☐ Previously exempt exempted parcel ☐ Previously on CA	
Auditor's Recommendation:	one
Comments:	
County auditor (signature) Date	

Forward two copies of the completed application to the Ohio Department of Taxation, Equalization Division, P.O. Box 530, Columbus, OH 43216-0530.

*If the property or any portion of the property is currently exempt, please indicate the type of exemption, the portion of property exempted, and the tax years to which the current exemption applies.

Treasurer's Certificate						
If the Treasurer's Certificate is not properly filled out and signed, the tax commissioner will have no jurisdiction to act on the application, and it will be subject to dismissal.						
(Notice to treasurer: The first paragraph of this certificate must always be complete.)						
I hereby certify that all taxes , special assessments , penalties and interest levied and assessed against the above described property have been paid in full to and including the tax year The most recent year for which taxes and special assessments have been charged is tax year						
I further certify that the only unpaid taxes , special assessments , penalties and interest which have been charged against this property are as follows:						
Parcel Number	Tax Year	Taxes (including penalties and interest)	Special Assessments (including penalties and interest)			
If additional years are	e unnaid nleas	e list on an attached shee	<u> </u>			
•		o not on an attaonoù onoc				
Have tax certificates been sold under R.C. 5721.32 or 5721.33 or any of the property subject to this application?						
Are any unpaid taxes listed on this certificate subje	ect to					
a valid delinquent tax contract under R.C. 323.31(Yes				
If yes, list tax years						
Comments:						
County treasurer (signa		Date				